

**UNITED STATES DISTRICT COURT**  
**District of Minnesota**  
**NOTICE OF APPEAL**

USCA 8 NO \_\_\_\_\_

United States of America

Plaintiff

vs

District Court Docket Number \_\_\_\_\_

Defendant

District Court Judge \_\_\_\_\_

Notice is given that \_\_\_\_\_ appeals to the United States Court of Appeals for the Eighth Circuit from the ☐ Judgment & Commitment ☐ Order (Specify) \_\_\_\_\_ entered in this action on \_\_\_\_\_

Signature of Defendant's Counsel

Typed name of Defendant's Counsel

( )

Street Address/Room Number

Telephone Number

City

State

Zip

Date

**TRANSCRIPT ORDER FORM**  
**TO BE COMPLETED BY ATTORNEY FOR APPELLANT**

☐ Please Prepare a transcript of:☐ I am not ordering a transcript because☐ Pre-trial proceedings☐ Previously filed☐ Testimony or☐ Other (Specify) \_\_\_\_\_☐ Portions thereof \_\_\_\_\_☐ Sentencing☐ Post Trial Proceedings☐ Other (Specify) \_\_\_\_\_

**CERTIFICATE OF COMPLIANCE**

Appellant hereby certifies that copies of this notice of appeal/transcript order form have been filed/served upon US District Court, court reporter and all counsel of record, and that satisfactory arrangements for payment of costs of transcripts ordered have been made with the court reporter. (FRAP 10(b)). Method of payment \_\_\_\_\_ Funds, \_\_\_\_\_ CJA Form 24 completed (see separate CJA 24 form in criminal appeals form)

Attorney's Signature

Date

NOTE: Complete All Items on Reverse Side

**INFORMATION SHEET  
TO BE COMPLETED BY ATTORNEY FOR APPELLANT**

1. Defendant's Address : ADDRESS REDACTED  
ADDRESS REDACTED
2. Date of Sentence: \_\_\_\_\_ ☐ Jury ☐ Non-Jury  
Offenses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trial Testimony - Number of days \_\_\_\_\_ Bail Status: \_\_\_\_\_
3. Sentence and Date Imposed: \_\_\_\_\_  
\_\_\_\_\_
4. Appealing: Sentence ☐ Conviction ☐ Both ☐  
Challenging: ☐ Application of Sentencing Guidelines  
☐ Constitutionality of Guidelines  
☐ Both Application and Constitutionality
5. Date Trial Transcript ordered by Counsel or District Court: \_\_\_\_\_  

Stenographer in Charge : \_\_\_\_\_  
(Name, Address, Phone) \_\_\_\_\_  
\_\_\_\_\_
6. Trial Counsel Was: ☐ Appointed (no fee required) ☐ Retained (filing fee \$505 unless IFP granted)  
Does Defendant's financial status warrant appointment of counsel on appeal?  
☐ Yes ☐ No  
Affidavit of Financial Status filed: \_\_\_\_\_  

Is there any reason why trial counsel should not be appointed as counsel on appeal?  
☐ Yes ☐ No
7. Assistant US Attorney Name and Phone Number: \_\_\_\_\_  
\_\_\_\_\_

**Court Reporter Acknowledgment**

\_\_\_\_\_  
Date Order Received

\_\_\_\_\_  
Estimated Completion Date

\_\_\_\_\_  
Est. Number of Pages

\_\_\_\_\_  
Court Reporter Signature

\_\_\_\_\_  
Date